

In re Matthew Jason Singer
Shawnna Marie Singer Case No. _____
Debtor(s) _____

SCHEDULE I. CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor in a chapter 12 or 13 case whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

| Debtor's Marital Status: | DEPENDENTS OF DEBTOR AND SPOUSE | |
|--------------------------|---------------------------------|--|
| | RELATIONSHIP | AGE |
| Married | Daughter | 18 |
| EMPLOYMENT | DEBTOR | SPOUSE |
| Occupation | Attorney- Sole Practitioner | Court Reporter |
| Name of Employer | Self employed | County of San Bernardino |
| How long employed | 6/01 | 6/98 - Off on Disability* |
| Address of Employer | | Trial Courts of California 8303 Haven Rancho Cucamonga, CA 91730 |

INCOME: (Estimate of average monthly income)

Current monthly gross wages, salary, and commissions (pro rate if not paid monthly)

Estimated monthly overtime

| DEBTOR | SPOUSE |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |

SUBTOTAL

LESS PAYROLL DEDUCTIONS

- a. Payroll taxes and social security
- b. Insurance
- c. Union dues
- d. Other (Specify) _____

| | |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |

SUBTOTAL OF PAYROLL DEDUCTIONS

TOTAL NET MONTHLY TAKE HOME PAY

Regular income from operation of business or profession or farm (attach detailed statement)

Income from real property

Interest and dividends

Alimony, maintenance or support payments payable to the debtor for the debtor's use or that of dependents listed above

Social security or other government assistance

(Specify) State Disability @ \$705.00 per week*

*for another 6 mo. then may apply for perm disability

| | |
|---------|---------|
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |

Pension or retirement income

Other monthly income

(Specify) _____

| | |
|-------------|---------|
| \$ 7,500.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |
| \$ 0.00 | \$ 0.00 |

TOTAL MONTHLY INCOME

TOTAL COMBINED MONTHLY INCOME \$ 10,555.00

(Report also on Summary of Schedules)

Describe any increase or decrease of more than 10% in any of the above categories anticipated to occur within the year following the filing of this document: